



1FW

TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application No.	10/749,616
		Filing Date	December 30, 2003
		First Named Inventor	Miroslav R. Petrov
		Art Unit	2194
		Examiner Name	Andy Ho
Total Number of Pages in This Submission	18	Attorney Docket Number	6570P024

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">*Cross-Reference to Related Application (1) page. *2 Return Postcards</div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Robert B. O'Rourke, Reg. No. 46,972 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	8/23/07

CERTIFICATE OF MAILING/TRANSMISSION		
I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.		
Typed or printed name Carrie Boccaccini		
Signature		Date 8/23/07



FEE TRANSMITTAL for FY 2006

Patent fees are subject to annual revision.

Complete if Known

Application Number	10/749,616
Filing Date	December 30, 2003
First Named Inventor	Miroslav R. Petrov
Examiner Name	Andy Ho
Art Unit	2194
Attorney Docket No.	6570P024

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$) 0.00

METHOD OF PAYMENT (check all that apply)

- ☐ Check ☐ Credit card ☐ Money Order ☒ None ☐ Other (please identify): _____
- ☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP
- For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- ☐ Charge fee(s) indicated below ☒ Credit any overpayments
- ☐ Charge fee(s) indicated below, except for the filing fee ☒ Any concurrent or future reply that requires a petition for extension of time should be treated as incorporating an appropriate petition for extension of time and all required fees should be charged.
- ☒ Charge any additional fee(s) or underpayment of fee(s) during the pendency of this application.

FEE CALCULATION

1. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
36	36*	0	\$0.00
4	4*	0	\$0.00

Multiple Dependent

Large Entity	Small Entity	Fee Description
Fee Code	Fee Code	Fee (\$)
1202 50	2202 25	Claims in excess of 20
1201 200	2201 100	Independent claims in excess of 3
1203 380	2203 180	Multiple Dependent claim, if not paid
1204 790	2204 395	**Reissue independent claims over original patent
1205 300	2205 150	**Reissue claims in excess of 20 and over original patent

**or number previously paid, if greater, For Reissues, see below

SUBTOTAL (1) (\$) 0.00

2. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description
Fee Code	Fee Code	Fee (\$)
1051 130	2051 65	Surcharge - late filing fee or oath
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet.
2053 130	2053 130	Non-English specification
1251 120	2251 60	Extension for reply within first month
1252 450	2252 225	Extension for reply within second month
1253 1,020	2253 510	Extension for reply within third month
1254 1,590	2254 795	Extension for reply within fourth month
1255 2,160	2255 1,080	Extension for reply within fifth month
1401 500	2401 250	Notice of Appeal
1402 500	2402 250	Filing a brief in support of an appeal
1403 1,000	2403 500	Request for oral hearing
1451 1,510	2451 1,510	Petition to institute a public use proceeding
1460 130	2460 130	Petitions to the Commissioner
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)
1806 180	1806 180	Submission of Information Disclosure Stmt
1809 790	1809 395	Filing a submission after final rejection (37 CFR § 1.129(a))
1810 790	2810 395	For each additional invention to be examined (37 CFR § 1.129(b))

Other fee (specify) _____

SUBTOTAL (2)

(\$)

Fee Paid

SUBMITTED BY

Name (Print/Type) Robert B. O'Rourke

Registration No. (Attorney/Agent)

46,972

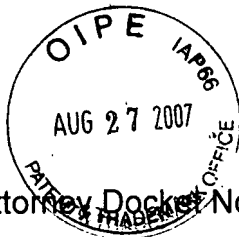
Telephone

(408) 720-8300

Signature

Date

8/23/07



Attorney Docket No. 6570P024

Patent

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re the Application of :
Miroslav R. Petrov, et al.

Application No.: 10/749,616

Filed: December 30, 2003

For: SYSTEM AND METHOD FOR
INTEGRATED LOGGING AND TRACING
FUNCTIONS IN AN ENTERPRISE
NETWORK

Examiner: Ho, Andy

Art Unit: 2194

Confirmation No: 8285

I hereby certify that this correspondence is being deposited
with the United States Postal Service as first class mail with
sufficient postage in an envelope addressed to the
Commissioner for Patents, P.O. Box 1450, Alexandria, VA
22313-1450.

on August 23, 2007

Date of Deposit

Carrie Boccaccini

Name of Person Mailing Correspondence

Signature *Carrie Boccaccini* Date 8/23/07

Mail Stop: Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450.

AMENDMENT AND RESPONSE TO OFFICE ACTION

Dear Examiner:

In response to the Office Action dated July 6, 2007, Applicant respectfully
requests that the above-identified application be amended as follows and that the
following remarks be considered: